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THE PSORIASIS PROGRAM

Functional Medicine Testing



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Psoriasis and Functional Medicine Testing



"There is nothing like looking, if you want to find something"
J.R.R Tolkien, The Hobbit

I've often said that focusing on the psoriasis patient's individual cause of their disease will give the best chances of providing a personalized framework for the diagnosis and treatment. There are five primary causative factors that give rise to nearly all chronic disease, including a condition like psoriasis: namely toxins, allergens, infections, poor diet, and stress. Several of these causes can be assessed with correct testing, and You will be able to read a lot more about psoriasis and toxins,

detoxification and internal cleansing, the right kind of diet to have with psoriasis, allergies and psoriasis and how stress affects and aggravates psoriasis in several other books I have written on psoriasis that make up The Psoriasis Program

The purpose of this particular booklet called Psoriasis and Functional Medicine Testing is to outline the various tests available to you, especially a test to show you the underlying digestive and/or immune problems that may well be hindering your recovery.

Functional laboratory testing (authorized by your naturopathic or integrative medicine doctor) is different from conventional pathology based testing that is generally requested by your conventional medical doctor, in that it can discover any changes in the body's function which are a deviation from the norm. Conventional medical testing on the other hand concerns itself primarily with assessing if there is any pathology (disease). Functional testing concerns itself with assessing any deviations from the normal healthy body which can then be rectified *before* pathology begins. Doesn't' this make sense? It sure does to me, yet most all medical practitioners concern themselves with disease and not wellness anyway, so testing for the function of the body becomes irrelevant because the person is not yet sick to actually require treatment.

Those with psoriasis will be amazed to discover various "deviations from the norm" once they have completed the tests I'll outline shortly. That's not to say you won't discover certain subtle deviations with a "healthy" group of the population, or more serious deviations in those with diseases other than psoriasis. Why is this so? It is because most all people with disease, and even many who are "healthy" will have functional disturbances that will reflect in test result findings.

You may have heard of the saying: "An ounce of prevention is better than a pound of cure". Better to assess what is going on and to make corrections or changes to your diet and lifestyle to get you back on track sooner rather than later. Depending on the particular functional test and their respective results, the main points which become relevant and which I raise with a patient after a careful consideration of their case-history along with their results are the following:

- Diet modification for the psoriasis patient
- Initiate detoxification protocols – when it is necessary and how.
- Lifestyle modification for the psoriasis patient
- Natural skin treatments, moisturizers, etc.
- Specific probiotic and nutritional supplementation recommendation.
- Anti-fungal, anti-bacterial and/or anti parasitic dietary supplements.
- General anti inflammatory supplements such as omega-3 and antioxidants.
- Follow-up testing – when and which test.

Test Results Are Important To Consider, But Never Rely On Them Exclusively

Remember, it is more important in the end to consider the patient with psoriasis rather than purely the test results of the psoriasis patient, and this is where some practitioners potentially get confused in my opinion, believing that it's all about the test results rather than the patient. Basing a treatment plan purely on "pushing the results back to normal" is not what I'm interested in as a successful practitioner. I'm more interested in my patient with psoriasis, and what she can do eliminate the problem for good, not just encourage her to temporarily improve her test results.

But what if her test results are incorrect or the integrity of the sample was compromised? I have seen this on numerous occasions when I have been asked to assist in interpreting results for a practitioner.

For example, with a Hair Analysis the patient submitted colored or dyed hair. With a Food Allergy blood test, the patient was taking an antibiotic right up until the blood was drawn or omitted every single food they believed they had an allergy, with a Comprehensive Stool Test the patient was taking probiotics during the test, etc.

The bottom line is not to rely exclusively on any test result, there are just too many variables why the test results may not be quite perfect but rather form a reasonably good guideline as to where to go as far as treatment is concerned. The other point I'd like to make is that the first test results obtained form a yardstick or baseline to compare subsequent results to.

I have found in some cases that a patient will come back in several years showing a similar result that she originally presented with, a confirmation perhaps that the treatment was not vigorous enough initially or that she didn't commit to the changes recommended to her diet and lifestyle. You the patient spend money when you come to seek advice, the consultation costs and the test costs good money. Why would you go to this trouble and expense and then not follow on through? Psoriasis is no laughing matter and it IS possible for you to be free from the itchy, scaly and red flaky skin. You spend the money and we get the test results back, and that's when you will need to carefully think about your next move.

Now I'd like to tell you of the different functional tests that are available to you to assess any underlying causes of your psoriasis, as well as the advantages and disadvantages of these different kinds of tests. I have used them all in my clinic for many years, and you may be familiar with some of these tests and not so familiar with others.

The 9 Best Functional Lab Tests For Psoriasis Patients

1. CDSA x 3 (Comprehensive Digestive Food Analysis) - Stool
2. Food Allergy Testing (IgE and IgG) - Blood
3. Celiac Testing - Blood
4. Candida Antigen Testing – Blood and Stool
5. Comprehensive Wellness Profile (CWP) - Blood
6. Liver Function Testing - Urine
7. Intestinal Permeability Testing - Urine
8. Vitamin and Mineral Blood Tests For Status - Blood
9. Omega 3 and Omega 6 Fatty Acid Testing - Blood

Direct Labs For Testing

Did you know that you could authorize any of these tests yourself without having to see a doctor? Direct Labs offers a wide variety of low-cost, high-quality laboratory tests at a fraction of the cost. To see more categories visit their [Tests Page](#).

But how do you know which test to get, which test is the 'best' one for you? You will be able to read about each individual test and their applications below. If you want to know my opinion on the overall best test, it is the first test – the Comprehensive Digestive Stool Analysis.

Here is the URL if you are interested in having any of these tests performed:

[The Best Tests For Psoriasis](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code **R-EBN**

International orders are OK, Direct Labs can work with most countries around the world, shipping costs vary.

Direct Labs, LLC.	Phone Numbers	Email
4040 Florida St. Suite 202 Mandeville, LA 70448	Local: (985) 624-9186 Toll-Free: (800) 908-0000 Fax: (985) 626-4020	Customer Service: contact@directlabs.net

You will find that these tests are priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret any of these test for a standard hourly rate as well.

Let's now explain some of these tests in some detail.

Functional Test # 1

The CDSA Test x 3 (Comprehensive Digestive Stool Analysis)

Have you read my booklet entitled The Psoriasis and Candida Connection yet? The identification of abnormal levels of yeast species, bacteria and parasites in the stool is

an important diagnostic step in therapeutic planning for patients in our clinic with chronic gastrointestinal and other symptoms that may be linked with psoriasis.

The CDSA test provides me the clinician with a wide array of the most useful clinical information to help me plan my most appropriate treatment protocol that is quite specific to you - the individual patient.

You may be thinking right now, what on earth does a stool test have to do with my psoriasis? Why would I want to do a stool test if my problem is my skin? How can they be linked, wouldn't I be looking in the wrong area if I have a problem with skin and not my digestive tract? I can tell you this, if you optimize your digestive system, you stand the best chance of beating your psoriasis. A 2001 study¹ showed a clear-cut link between a candida overgrowth in the digestive system and psoriasis. In fact, over three-quarters of those with psoriasis have a yeast infection.¹

Your doctor or skin specialist (dermatologist) may have you thinking that there is nothing wrong with your digestive system, and that treatment should be primarily aimed at your skin and *not* your digestive system nor diet. Wrong thinking. Your immune system is at fault with psoriasis, which you may well be aware of. The drugs your doctor or skin specialist prescribes are often immune-suppressing drugs. It is worth mentioning that your small intestine has a very high concentration of your immune system in it, in fact, some experts say as high as 60 percent. Does it not make sense to optimize the function of your digestive and immune system? It does to me, and nearly every single chronic psoriasis case will have some kind of digestive problem that needs fixing up.

Can you also remember (see The Psoriasis and Candida Connection) that previously I've mentioned of the connection between a candida yeast infection and psoriasis, and that many experts have noticed a very definite link between the two? The stool test will give you the answers you are looking for in terms of the health of your digestive system and what you can do to optimize its function.

While this test is not for everybody, it is expensive, but it can help to solve some of the most difficult psoriasis cases by providing me with all the answers I am looking for. The CDSA x 3 with parasitology is the most comprehensive and commonly ordered functional stool test, assessing the widest range of intestinal conditions. This test will provide information on your ability to digest, metabolise, and absorb nutrients, as well as report all bacterial flora (beneficial, imbalanced and disease causing), all yeasts, and all intestinal parasites (worms, eggs, larva, and protozoa).

It is important to analyse both the intestinal digestion/absorption functions as well as the levels of yeast, bacteria, and parasites because symptoms of mal-digestion or mal-absorption often mimic those of chronic bacterial, yeast, or parasitic infections. Additionally, chronic bacterial, yeast, or parasitic infections may have adverse effects on the body's metabolic and absorptive processes, which can all be assessed using this most comprehensive test.

As you probably aware by now after reading my other books about psoriasis, most patients with psoriasis have an underlying digestive issue, and correct assessment and treatment of these issues is a sure fire way to get your health in top shape. Most patients I have seen over the years that have psoriasis, come into my clinic with some kind of digestive symptom which often includes varying degrees of some of these complaints: abdominal pain, cramping, bloating, gas, diarrhea or constipation and/or various forms of digestive irritations.

yeasts, bacteria and various pathogens such as parasites are not uniformly dispersed throughout the stool, which is a good reason why you should insist on three stool samples, and by only having one sample performed it may lead to undetectable or low levels of yeast for example identified by microscopy, despite a cultured amount of yeast. Conversely, microscopic examination may reveal a significant amount of yeast present, but no yeast cultured. Having three stool samples assayed, and NOT all mixed together and assayed as one sample, something many labs do, you are increasing your chances of yeast detection.

While candida does not always survive transit through the digestive tract rendering it unviable, the microscopic finding of yeast in the stool is helpful in identifying whether there is proliferation of yeast or not. Although some yeast may be normal; yeast observed in higher amounts is considered abnormal.

My Personal Choice Of Testing For Psoriasis Is Functional Stool Testing

Personally I like the CDSA test the best out of all the functional tests because it goes right to the heart of the problem, the digestive system. The CDSA give me the most useful information of all the tests, and here are the main points this test reveals:

- Bacteriology culture
- Yeast culture
- Parasitology microscopy
- Giardia and cryptosporidium assay
- Digestion & absorption markers (elastase, fat stain, muscle & veg. fibres, carbs)
- Inflammatory markers (lysozyme, lactoferrin, white blood cells, mucus)
- Immunology (secretory IgA – sIgA)
- Short chain fatty acids (the end product of bacterial fermentation of beneficial bacteria in the bowel)
- Intestinal health markers (red blood cells, pH, occult blood)
- Macroscopic (visual) appearance

The CDSA test in my opinion is the Rolls Royce of digestive tests, and if you can afford the price tag then you should definitely do this test, no question about it. I have solved an amazing amount of difficult right through to "impossible" psoriasis cases with this test, when all else failed the patient.

With The CDSA - Should I Do 1, 2 Or 3 Stool Samples?

I recommend that you always consider the x 3, especially if you are chronically unwell. The 3 day collection period is considered the gold standard by most gastroenterologists, and the scientific literature suggests that three-day collections give maximum sensitivity and specificity for parasite and candida yeast detection because many parasites do not shed from the host at even intervals, and yeasts have varying growth cycles as well. One day's sample may produce negative results, while the following day's sample may be positive, and the day after that the stool may be absolutely loaded with bugs. As I've mentioned previously, the effects of this optimal collection are diminished by the unscrupulous practice of some laboratories which unfortunately blend the three samples into one and perform only one analysis.

There are only a handful of labs that do not pool samples and perform separate analyses on each sample submitted for testing, and the laboratory I deal with is Doctor's Data in Chicago. You can also just do a parasitology test and even a stand-alone candida test through the same company, and if your results have come back positive with the CDSA x 3, you may just want to repeat the candida test as a follow-up to save on costs.

Because candida albicans is present in the gastrointestinal tract, it is possible to culture (grow it) from a stool sample. Using a special culture medium and the right anaerobic conditions (reduced oxygen), candida albicans can be grown and identified this way. I have understood from my research that if you can culture candida albicans from a stool sample, then you have a pretty bad case of a yeast infection. Other say that this is fine, just look at the numbers, and if all three samples come back as positive then you have a real problem on your hands. You should not be able to culture a significant viable yeast population from a motion you have passed, if you can, it means you have a significant candida overgrowth in your large bowel.

And remember, a significantly high amount of persons with psoriasis have been shown to have a candida yeast infection, and the chronic psoriasis cases are worse than those with mild psoriasis.

Some specialist laboratories are even able to identify the different species of candida present, and such a result could be quite significant, as some strains have a tendency to be harder to eradicate (such as candida tropicalis) than candida albicans.

It's Not Just About A Positive Candida Result, What Is Your Level Of Beneficial Bacteria?

The other thing I look for in a CDSA test is the actual level of other bad bacteria in the sample and in particular the level of beneficial bacteria. Is there a 1, 2 or a 3+ of good and/or bad? You may be concerned for example if you have a positive result with candida after a stool analysis, but have failed to look at the amount of beneficial bacteria, only to discover that you have a 3+ Lactobacillus acidophilus level. You should be concerned if there is NG (nil growth) in terms of Lactobacillus acidophilus, and some of the chronic cases this is exactly what I have found, yeast in all three stool samples and NG in terms of the lactobacillus species.

I want you to remember that it is not always about killing candida; it is about restoring digestive harmony, and by assessing your level of the good and bad bacteria as well as yeast you will be in a powerful position to restore this harmony. No other pathological or functional test can give you this incredible level of information, now you can see why I believe this to be the best test you can do if you are serious about getting rid of your yeast infection permanently.

Microscopic Yeast In Stool Samples

A CDSA will reveal whether yeast will be in the stool sample or not, and microscopy will be most helpful in finding if fungi like candida are present. Yeast is commonly found in very tiny amounts in a healthy intestinal tract, and while small quantities which are reported as "none or rare" may be normal, any yeast observed in higher amounts, "few, moderate, or many" is considered abnormal.

In a healthy individual, any candida overgrowth will be prohibited by beneficial flora, the intestinal immune defence (secretory IgA) as well as intestinal pH.

Acids like lactic acid are produced by lactobacillus species which lower the pH and thereby create an environment which is unsuitable for yeast to thrive in, a good reason to have a 2 or a 3+ of beneficial lactobacillus in your stool counts.

It is most beneficial to have excellent numbers of lactobacillus, because they also produce natural antibiotics themselves like hydrogen peroxide, acidolin and lactobacillin.

A significant and much over looked problem with culturing yeast from a stool sample is that they are colony forming agents and are therefore not evenly dispersed throughout the stool sample, so even though yeast may well be found microscopically, it may not necessarily be cultured successfully even when collected from the patient's same bowel motion.

CDSA Inflammatory Markers

Inflammation in the digestive system can significantly increase your chances of intestinal permeability, indicating an underlying leaky gut and compromising your ability to absorb nutrients. The extent of this inflammation, whether caused by bad bacteria or candida or inflammatory bowel disease (IBD), can be assessed and monitored by examination of the levels of biomarkers such as lysozyme, lactoferrin, white blood cells and mucus.

These markers can be used to differentiate between inflammation associated with Crohn's disease or ulcerative colitis (IBD - inflammatory bowel disease), and less severe inflammation (IBS - irritable bowel syndrome) that can be associated with the presence of bacteria or yeast overgrowths.

Lactoferrin

In the CDSA stool test, you will find that a marker called lactoferrin is only markedly elevated prior to and during the active phases of IBD, but not with IBS. Therefore, monitoring stool levels of lactoferrin in patients with IBD can therefore facilitate timely treatment of IBD.

Lysozyme

Lysozyme is another stool marker some labs perform; it can be detected particularly during an acute attack of Crohn's disease. It is one of the best inflammatory markers to detect this kind of IBD.

Calprotectin

Calprotectin is a protein found in white blood cells called neutrophils that make up three-quarters of your white blood cell counts. Some stool testing labs use calprotectin as their inflammatory marker, and some experts consider calprotectin to be the gold standard measurement of intestinal inflammation. The main diseases that cause an increased excretion of fecal calprotectin are Crohn's disease, ulcerative colitis and neoplasms such as bowel cancer. Levels of fecal calprotectin and lysozyme will be found to be normal in patients with irritable bowel syndrome (IBS). Although a relatively new stool test, fecal calprotectin is regularly used as indicator for inflammatory bowel disease IBD during treatment and as diagnostic marker.

The SIgA Marker: Candida, Infection, Allergies And Leaky Gut

Since the vast majority of the antibodies called IgA (sIgA, or secretory IgA) normally resides in your digestive system where it prevents binding of bad bacteria and yeasts to the mucosal membrane, it is essential to know the status of sIgA in the digestive system. I have discovered that SIgA is quite possibly the only bona fide marker of immune status in your digestive system.

There are several different immunoglobulins in the various tissues of your body, but secretory IgA is the main one found in mucous secretions. In my practice, I have found that a person's SIgA levels is one of the first factors I look at when it comes to the stool test, it allows me to see how strong that person's gut immune health connection is, and in particular, how capable their immune system is in fighting any intestinal infection.

IgA is produced in your blood and transported across the mucosal layer in addition to your intestinal cells, which produce an incredible two to three grams of this antibody everyday. SIgA production appears to peak in childhood, declining after about sixty years of age. When it comes to mucous, people are all too aware of this about their nose or throat, but in fact the whole digestive system is coated in the stuff.

A healthy layer of mucous is the gut's first line of defense against pathogens like ingested viruses, parasites, bacteria, yeast in addition to any foreign food proteins and toxins.

It is important to know that your mucosal barrier doesn't only consist of the lining of your entire digestive system, it also makes up the lining of your mouth, eyes, nasal cavity, sinuses, upper part of your lungs, the urethra of men and women and the vagina in women. Everywhere there is a mucosal system you will find that it is covered in a fine layer of mucous, and in this mucous you will find secretory IgA.

You may have you noticed, these are also key areas where you will find a yeast infection and therefore it is important for your body to maximize this antibody's production and heighten its activity if you are you are to win the fight and crush your yeast infection, or any infection for that matter.

The main role of SIgA is to defend the surfaces of the digestive system and other systems coated in mucous and to prevent these potential toxic substances from binding to cell surfaces, becoming absorbed by cells lining the mouth, throat, lungs, urethra, vagina and intestines, and ultimately invading the body. SIgA has the ability to cling or adhere to these foreign substances and neutralize them along with their toxins which may be released, and help to remove these foreigners by ensuring they get excreted out of the body in the feces.

Low SigA Levels

Low SIgA levels can signify that there is a progressive or underlying developing food allergy occurring, and if levels remain too low or are borderline, you will find that it can take considerably longer for the body to heal and repair any leaky gut.

When a patient has a consistently low SigA level in her stool or saliva, it tells me why she can't seem to get on top of her chronic yeast infection or food allergy.

But it also reveals that her immune system generally is having a hard time coping, and can reflect in a poor recovery from psoriasis, rheumatoid arthritis or any other auto-immune condition.

A 2004 study² found psoriasis patients had lower concentrations and secretion rates of sIgA and lysozyme compared to those without psoriasis. However, the study involving 40 psoriasis patients discovered that the sIgA levels are variable and not related to the actual severity of psoriasis.

It's more important and intelligent to fix any possible underlying digestive issues when it comes to the immune system than to worry about rubbing coal tar on a person with psoriasis or treating a patient with rheumatoid arthritis with steroids to reduce their inflammation. SIgA levels which persistently remain low for years can eventually result in some of the most severe cases of systemic candidiasis I have ever seen, because the mucosal barriers are no longer effective in protecting the body against yeast and its metabolites. If you take the IgA soldiers away from their mucosal borders, what is ultimately protecting your body from being over run by free loading bacteria and yeasts?

A person with chronic psoriasis will need to get their SigA levels UP, and this is often the key when it comes to healing that leaky gut quickly and permanently. A sustained higher SIgA level will mean more immune fighting power internally.

Research has revealed that children with autistic tendencies and celiacs have low SigA levels and SIBO (small intestine bacterial overgrowth), and so do people with psoriasis, irritable bowel syndrome and inflammatory bowel syndrome (ulcerative colitis and Crohn's disease).

I always try to establish *why* a person's SIgA levels are low and remain low, and it could be as simple as one food the person is routinely eating which is challenging the body (see the Low-Allergy Diet sheet in section 1 of chapter 5). What are their levels of beneficial bacteria? It is surprising how many stool tests I have seen that "NG" (no growth) when it comes to lactobacillus acidophilus, and sometimes a probiotic can make all the difference for this reason. Do they have a significant parasite or bacterial overgrowth that could be reduced through diet and supplementation?

If your SigA levels don't seem to come up to speed inspite of your very best and sustained efforts, consider looking at the "obstacles to cure" in my book Psoriasis and Understanding The Lifestyle. You may have a diseased tooth or a low-grade inflammation elsewhere in the body, and there is a specific panel of blood tests that can be done to establish this inflammatory response. A bit of investigation can go a very long way towards resolving the low SIgA, and ultimately your psoriasis once and for all.

Perhaps you may have an established yet undiagnosed auto-immune disease? I've seen this occur on numerous occasions in those with psoriasis. Any chronic low-grade inflammation will be an immune-drain and will need to be addressed before you can expect a healthy rise in SigA levels, and then watch what happens to the unresolved yeast infection. The longer and more severe and compromised the SigA levels remain low in your digestive system, the more drain on the adrenal gland function that occurs, and you may slowly slide into adrenal fatigue. For this reason, I like a patient to complete the adrenal fatigue questionnaire if they have had psoriasis for some time, and most will have some degree of adrenal fatigue as a consequence of an

on going leaky gut and low sIgA levels. It is very important for you to understand the relationship between your immune system and adrenal fatigue, and for this reason I have written plenty on this topic. You will find more information on adrenal fatigue and immunity in my book entitled Psoriasis, Stress and Immunity.

Key Causes Of Low sIgA

- High Antigenic Load. A high load of circulating antibodies from food allergies can significantly depress sIgA levels, even in people who don't really have many overt symptoms. Check carefully for leaky gut syndrome, and be sure to follow the Low-Allergy Diet as outlined in the Psoriasis Diet.
- Certain pharmaceutical drugs. A little known fact is that certain drugs can induce a temporary IgA deficiency which will generally resolve after the drug is discontinued.
- These include anti-inflammatories both steroidal and non-steroidal, sulfasalazine, hydantoin, cyclosporine, gold, fenclofenac, sodium valproate, and captopril. Certain psoriasis drugs may well be indicated in inducing a low sIgA as well.
- Certain viral infections. Viral infections such as congenital rubella infection, Epstein-Barr virus (EBV) or Coxsackie virus infection, may result in persistent IgA deficiency. I am always on the lookout to see if the person had these infections in the past, as they can be a cause of continual low-grade sIgA levels for many years. Treat the adrenals and see what happens, get that cortisol UP.
- Poor nutrition A person with nutritional deficiencies may have difficulty mounting an appropriate sIgA immune response, deficiencies like zinc, vitamin C, iron, folate and various other deficiencies can hinder the production of sIgA. This is just one of the reasons to take a top quality multi vitamin and mineral dietary supplement.
- Inflammatory Bowel Disease. Lower sIgA levels are frequently found in those with ulcerative colitis or in those whose first degree relatives have the disease. A diagnosis must be made, has the person had a colonoscopy and appropriate blood testing?
- Stress. Lower levels of sIgA are frequently found in those with excessive cortisol production, so decreasing stress may lead to higher sIgA levels. These are the people more prone to developing adrenal fatigue, and I recommend that those with psoriasis of long duration do the adrenal fatigue test and get treatment when appropriate.
- Chronic Low-Grade Infections. Lower sIgA levels may also be found in those with chronic infections which may last for many years and remain undetected. They may have undetected bacteria or parasites because their mucosal defence mechanism may be weak or very poor. The allergic response may be increased as well, and they may have a potential tendency towards multiple food allergies. This is why I am careful in questioning patients about any hidden focal infections, and you can read a lot more about this in other books I've written on psoriasis, especially Psoriasis and Lifestyle.

High sIgA Levels

I more often will find a lower level of sIgA when it comes to stool testing, but occasionally discover an elevated sIgA in a stool test. An increase in sIgA will generally mean a heightened immune response which usually signifies inflammation. It will generally be an acute immune response, ongoing infection or significant food allergy.

An elevated sIgA along with an elevated lysozyme, calprotectin or lactoferrin level will tell you that there is inflammatory bowel disease (Crohn's disease or ulcerative colitis), an elevated sIgA with low or normal lysozyme, calprotectin or lactoferrin levels will tell you that there is either IBS (irritable bowel syndrome) or a significant food allergy or infection.

Both IBS and IBD are more common in those with psoriasis than you may think, and I believe this is partly caused by the long-term use of pharmaceutical drugs many take to "cure" their psoriasis. Read more about the conventional pharmaceutical drug treatment of psoriasis in my book *Psoriasis Conventional Medicine Treatment*.

I have noticed that patients with markedly elevated sIgA levels often feel quite ill, and some can feel really sick indeed. An upregulated immune response can create many different clinical scenarios and can affect many different systems of the body.

Microbial and microscopic studies of the stool are useful in identifying if bacteria, candida or parasites are present, and as you can now begin to see, this information can significantly aid in formulating a plan of successful psoriasis treatment. It is important to remember however that elevated sIgA levels have been found in the absence of bacteria, candida and parasites in people with atopic conditions like food allergies, urticaria, dermatitis and psoriasis. Again, comprehensive stool testing will reveal what is really going on inside the digestive system, and will take all that guesswork out of the equation.

Best Nutritional Way To Increase sIgA – My 4-R method

There are different things you can do to elevate sIgA, but one of the best ways is to use the Psoriasis Diet and to take the dietary supplements I have recommended.

Here is my 4-R method of nutritional supplementation, an excellent method to significantly enhance your sIgA levels:

1. **Remove** offending foods, crush candida and correct nutritional deficiencies: Follow the 3-Stage Psoriasis Diet as outlined in the Psoriasis Diet book. Consider antimicrobial, antifungal, and antiparasitic treatment in the case of opportunistic/ pathogenic bacterial, yeast, and/or parasite overgrowth. Take a good quality multivitamin to correct any underlying nutritional deficiencies.
2. **Replace** what is needed for normal digestion and absorption: Take a digestive enzyme supplement to significantly improve digestion and absorption.
3. **Reinoculate** with favorable microbes: Take a quality probiotic to enhance the growth of the favorable bacteria, supplement with prebiotics such as the correct fibers in your diet. (read more in the Psoriasis Diet book)
4. **Repair** digestive system cells: Repair the leaky gut and the immune system. Reduce the inflammatory response by taking an omega-3 dietary supplement and the probiotic.

More Ways To Increase sIgA Levels

- Colostrum has also been shown to increase sIgA levels. Colostrum is the first milk that contains a significant amount of immunoglobulins (antibodies) which helps confer additional immunity to an infant cow or human straight after birth.

- Colostrum has been shown to stimulate the production of sIgA and is certainly a good supplement to try.
- Prebiotics Make sure you eat plenty of healthy dietary fiber, you can read a lot more about fiber in my book the Psoriasis Diet. This is an overlooked area, because most people are too busy taking probiotics to worry about eating healthy prebiotic foods which feed the probiotics in their digestive system.
- Cayenne pepper has the ability to stimulate B-lymphocytes into manufacturing more SIgA. By taking 2 cayenne pepper capsules a day you will be increasing your levels.
- Saccharomyces boulardii is a beneficial yeast and one of the few probiotics which not only helps to fight a yeast infection, it can assist in boosting SIgA levels.
- Lowering stress levels has been shown to increase SIgA levels by lowering the stress hormone cortisol. Elevated cortisol levels have been proven to suppress the production of SIgA.

Be sure to study my book Psoriasis, Stress and Immunity to more fully understand why rest and relaxation is one of the best kept secrets when it comes to crushing your candida for good.

- Folowing the Psoriasis Diet principles By following my dietary recommendations you will be ensuring your that you are doing everthing right diet-wise to repair the leaky gut and elevate lowered levels of SIgA.
- Take the dietary supplements Be sure to follow the 4-R dietary supplement program, it will ensure that you will increase your SIgA levels in the shortest possible time. It could mean the difference between reducing the severity of your skin symptoms to permanently eliminating your psoriasis in the shortest possible time.

Whenever I get test results back, I immediately wonder what the immune panel of this patient's CDSA test looks like; are there high levels of sIgA in the test results, indicative of a lot of antibody production in the digestive system? If there is a high level, then I know that I have to work quite hard on the Hypo Allergenic Diet up front with this patient, because the higher the level of sIgA, the stronger the immune response will be towards allergenic foods that person is consuming right now. The Hypoallergenic Diet by the way is the second stage of the Psoriasis Diet, you can read about it in one of the first psoriasis books I've written in my psoriasis series.

CDSA Test Collection Requirements

- Eat the foods as you normally would. Just like the food allergy tests, I would prefer that you eat what you WANT to eat, follow your desires as the test results will then be a more true reflection of not only what is going on in your gut, but what digestive issues got you to this point where you now seek treatment. What is the point of testing the stool of a person who a month ago went onto a super strict healthy dietary approach for example, after they spent years drinking alcohol a few times a week, eating fries and following a processed and refined supermarket diet in general. I want the patient's stool test results based on the diet which they followed *before they decided to clean up their act*. This is the best way to ascertain what is really going on. You go back onto your healthy diet as soon as you have performed the stool test, but for the week leading up to the stool test you eat whet you like and want to eat.

- Avoid probiotics and preferably ALL dietary supplements for up to two days (but preferably an entire week) prior to the test. You may otherwise get a false negative result, especially with candida, bacteria and parasites.

Direct Labs For CDSA Testing

Note: This is a home collection test kit that will be mailed to you.

Fasting Required: No

Specimen: Stool

Special Instructions: Ship to lab Monday-Thursday only.

If you are taking antifungal or antibiotic medications, please finish the course of medication, and then wait three days before starting this collection. Please refrain from taking digestive enzymes, antacids, and aspirin for two days prior to and during the specimen collection, unless otherwise instructed by your physician.

Results: 10-14 Business Days

Description:

This is a 3 day stool collection. Specimen does not have to be collected on consecutive days. The more times you collect the higher probability you will have of a parasite being detected.

Parasites do not drop with every stool passing. The Comprehensive Stool Analysis with Parasitology is a non-invasive assessment of digestive and absorptive functions that includes digestion, absorption, bacterial balance, metabolism, yeast and immune status for patients with nonspecific GI-related symptoms, such as indigestion, dysbiosis (microbial imbalance), constipation, and diarrhea, as well as the presence of adaptable pathogens and monitoring the usefulness of therapeutic treatment of GI disorders

Here is the URL if you are interested in having this test performed:

[Comprehensive Digestive Stool Analysis Test](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code **R-EBN**

Direct Labs, LLC.

4040 Florida St.

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Phone Numbers

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Toll-Free Fax: (800) 728-9048

Email

Customer Service: contact@directlabs.net

You will find that the CDSA x 3 test is priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret this test for my hourly rate as well.

Good Tip – Stay in touch with your practitioner

Once you have started to improve or fail to improve after a few treatments, it is important to keep in touch with your doctor or naturopath. He or she will be interested in your progress and be keen to see you get well. I have noticed many times that whether a patient improves or aggravates, their visits to the clinic tend to taper off, and some people just stop coming, failing to show for their follow-up visit. Your practitioner has invested a considerable amount of time in helping you with your recovery from psoriasis, and by regularly keeping in touch, your practitioner will know if you still need to come in for follow-up visits, need further tests or assessments or any further treatment. Some patients just don't turn up after several visits, leaving practitioners wondering if they have improved to the point that they don't require any further treatment for the time being, or that they have aggravated and decided to take their health-care somewhere else. Let your practitioner know, because this communication will allow him or her to fine tune their future treatment protocols with you and other patients. Unmet expectations are one of the biggest reasons for "no shows" in the clinic, and are frustrating to both patient and practitioner alike.

Functional Test # 2

The Food Allergy Test IgE and IgG (Blood Test)

According to some experts, the Food Allergy Blood Test (serum) represents the most reliable means of detecting and abnormal antibody levels indicating potential food allergies at this point in time.

Certain foods may begin to provoke an immune response, and one of the main effects of such a response will be the production of elevated levels of specific antibodies.

Practitioners who focus on psoriasis treatment such as myself have noticed a definite improvement in the psoriasis patient's symptoms when less animal proteins are taken internally, and replaced with vegetable; poultry (chicken) or white fish based proteins. It is the protein foods that are often found to cause the allergic reactions in the body. The digestive system (especially the small intestine) directs a large amount of amino acids into the bloodstream, which come from digested protein sources. Amino acids are more frequently implicated in causing inappropriate antigen/antibody immune system reactions than other many other sources of nutrients that come from your diet, and these interactions can cause allergic reactions in your body that can be linked to the skin lesions we commonly see in those with psoriasis.

You will find that test another test I recommend, the Intestinal Permeability Test, is a specific test for determining if you have "leaky gut" or not, which is often associated in those who have psoriasis. Leaky gut ensures that partially digested proteins (peptides and polypeptides) are more likely to enter the bloodstream rather than fully digested protein sources (amino acids). And while certain amino acids are found to react with the immune system causing food allergies, the partially digested proteins are even more likely to do so, causing allergies leading to inflammation in the body.

Leaky gut syndrome is such an important topic, I've written an entire booklet on this entitled Psoriasis and Leaky Gut Syndrome, be sure to read it.

It is worth mentioning at this point however that bacteria, yeasts and various parasites can also stimulate such skin reactions. And for this important reason you will find that the Psoriasis Program includes the elimination of sugars and yeast foods from your diet, as well as the inclusion of fermented and cultured foods. The Psoriasis Diet discourages the proliferation of poor bacteria, yeasts and parasites while at the same time encourages the growth of beneficial bacteria that promote many aspects of good health.

One allergy that comes up from time to time in the Food Allergy Test reports is gluten, but not in all patients however, and for this reason it is not wise to assume that all people with psoriasis should have to avoid wheat and gluten.

Your white blood cells begin to make antibodies specific against the candida infection, and these antibody levels are measured by way of this test. Some say that it is not a good way to determine if you have an active and/or current allergy to a specific food, as the antibody levels can remain elevated for some time (in some cases, months or even years) and in some people, even the slightest exposure can increase the antibody levels. Others say this does not really matter, because if your levels are high right now, it means that you still have an immune system which is very much being affected by the food.

As the inflammation drops off causing the symptoms, so should the level of antibody activity, but it is worth noting here that for some people these antibody levels can remain high for several years.

The technique used to determine these antibody levels in the blood is called ELISA (enzyme-linked immuno sorbent assay), which is a very powerful and sensitive tool for the measurement of antibody levels in a person's blood. The way this test is performed is that a small sample of the patient's serum is coated onto a special plastic plate. The liquid portion (plasma) of the blood is tested, the red blood cells are discarded. The patient's sample is diluted and anything in that blood sample is then grown on this plate.

If any antibodies are present in the sample they will strongly bind to the antigen (the food the person is allergic to); all remaining sample that is not bound can then be washed away and a special substrate is added. This is a colourless solution that will cause to produce a coloured sample. This colour can then be very accurately measured by something called a "spectro-photometer". If an exact known level of antibodies is accurately determined, then the colour that this produces can be used to produce a standard curve. A computer can then analyse the test sample's colour to give an exact value of how many antibodies were in the original sample, now how clever is that!

The Two Main Antigens – The Delayed And Immediate Immune Markers

It is worth pointing out that there are three antigens which can potentially tag the specific antibodies in your blood; they are immunoglobulin E (IgE), as well immunoglobulin G (IgG). Your body produces these antibodies in order to fight any antigens, or substances the immune system does not recognize as normal.

Please read more about food allergies and food intolerances in my book entitled "Introduction To Healthy Eating For Psoriasis", it is the third book in the Psoriasis Program series.

Be Careful When Interpreting Allergy Test Results

I have read in the scientific literature that there have been occasions where antibody levels have been found in excess of one hundred times that seen in a normal population, particularly in those with a history of long-term antibiotic use and in those with recurrent and chronic bacterial or fungal infections. Having a strong family history of allergies (eczema, asthma, hayfever, etc.) can also make a person more likely to have a heightened level of antibodies in particular, so careful case-taking is necessary when performing this test to uncover such a history. As usual, you should never rely solely on the outcome of any one single test.

Mucosal Antigen Levels Versus Serum Antigen Levels

In addition to the blood, you can determine also determine different antibodies from the stool or the person's saliva. It is important to remember that psoriasis is in essence an inflammatory condition affecting the person's entire body, and therefore the blood's serum in this regard represents a more suitable medium for the detection of systemic antibodies than either a saliva or stool sample. Blood-based antigen levels will tell us that the inflammation is more of a systemic nature, meaning more widespread throughout the body, and can literally travel anywhere the blood can go, and high serum antibody levels are therefore much more indicative of major systemic inflammations and infections. Now you can see why I recommend the serum antibody levels over the saliva levels for the reasons mentioned above.

ELISA (Blood) Test Or Saliva Test Collection Requirements

Be sure to avoid all non-essential medications and ALL dietary nutritional supplements for at least a week before the blood is drawn before you complete this test. I am surprised how many patients I have seen over the years who take supplements and drugs and even antibiotics right up until they complete the food allergy (or any) test, what a waste of money. In addition, I would prefer that you eat and drink all the foods and beverages you desire. Yes, that's right; eat what you feel like eating for a seven day period before this test, and the reason for this is to establish the true level of antigens in your body based on your cravings and desires.

This instinctive diet will reveal what is really going on inside your body and will accurately reveal the antibody level based on the diet which your body is screaming out for. Your antibody levels will be a reflection of what "taste's good" to you, and if you are one of those psoriasis patients who has an underlying bacterial or yeast infection or a problem with parasites, then you may crave the sweeter foods. Every person's treats are a little different, so eat what you really want to eat for seven days and then complete the test. Those with gut issues often have increased inflammation and leaky gut syndrome. Unless you feel absolutely terrible for eating the foods you desire, just eat what you want to eat for about a week and then perform the test. As soon as you have completed the test then go back to the anti candida diet you were before.

Direct Labs For Food Allergy Testing

Note: This is a test kit that will be mailed to you and requires a blood draw.

Test is not suitable for children less than 6 months.

Fasting Required: Yes 10-12 Hours

Specimen: Blood

Results: 10-14 Business Days

Description:

This Standard Food Panel tests for allergic reactions by using IgG and IgE (IgE has immediate symptoms unlike the delayed appearance in IgG reactions) testing.

Allergic reactions to foods and inhalants are characterized by enhanced allergen-specific immunoglobulin serum levels with activation of immune mediators of inflammation. Research indicates that food and inhalant allergies are implicated in a number of health problems. Through ELISA testing we provide a useful tool with which an individual's sensitization to food and inhalant allergens can be assessed.

Items tested: Casein, cheddar cheese, cottage cheese, mozzarella cheese, milk, goat milk, whey, yogurt, beef, chicken, egg white, egg yolk, lamb, pork, turkey, cocoa bean, coffee bean, honey, sugar cane, baker yeast, brewer yeast, apple, apricot, banana, blueberry, cranberry, red grape, grapefruit, lemon, orange, papaya, peach, pineapple, plum, red raspberry, strawberry, manila clam, Atlantic cod, Dungeness crab, halibut, American lobster, oyster, red snapper, pacific salmon, western shrimp, sole yellow fin tuna, almond, amaranth flour, barley, kidney bean, lima bean, pinto bean, soy bean, string bean, buckwheat, coconut, corn, filbert, wheat gliadin, wheat gluten, lentil, oat, green pea, runner peanut, pecan, white rice, rye, sesame, spelt, sunflower, walnut, whole wheat, asparagus, avocado, beet, broccoli, white cabbage, carrot, cauliflower, celery, cucumber, garlic, lettuce, common mushroom, black olive, white onion, green bell pepper, sweet potato, white potato, pumpkin, radish, green spinach, zucchini squash, and red tomato.

Here is the URL if you are interested in having this test performed:

[Food Allergy Testing](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code R-EBN

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You will find that the Food Allergy test is priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret this test for a standard hourly rate as well.

Functional Test # 3

The Celiac Test

Studies have linked gluten allergies with psoriasis; they are a common association as far as some researchers go. That is not to say that all people who have psoriasis have an issue with wheat or gluten. There is nothing wrong with trialing a strict gluten-free diet approach if you have psoriasis, especially psoriatic arthritis. You will be able to read more about going gluten-free in the comprehensive book *The Psoriasis Diet*.

Are interested in determining if you have sensitivity to gluten or whether you are in fact a celiac? There is a considerable difference here. You can be sensitive to gluten yet not necessarily have celiac disease, let me explain.

Gluten sensitivity and celiac disease both involve two distinctly different responses by your immune system to the protein called gluten that is found in rye, barley, and wheat and to a small degree in oats. It is difficult sometimes to pick the difference between these two conditions, because the symptoms can be quite similar, and this is why testing makes sense.

Celiac disease means an autoimmune reaction to gluten

Celiac disease happens when your immune system becomes inappropriately activated by gluten, which then attacks the lining of your small intestine with resulting the damage occurring called villous atrophy. Celiac disease can be so severe and remain undetected for many years, causing malnutrition, weight loss; osteoporosis and can even lead to cancer in extreme cases.

Celiac disease is classed as autoimmune by nature, and gluten itself does not cause the actual damage to the lining of the small intestine, it is the immune system's response to gluten that does the damage. Celiac disease has been linked with other autoimmune conditions such as Hashimoto's thyroiditis (autoimmune thyroiditis), Type 1 diabetes but also psoriasis. The remarkable thing about celiac disease is that even though it is an autoimmune disease that is known to affect about 1 in 130 people (or about one percent of the population), less than 5 percent of those who have celiac disease actually realize they have it.

Gluten sensitivity causes inflammation, not autoimmunity

Gluten sensitivity is also known as gluten intolerance, and has been now recognized as a separate and distinct condition in its own right. A lot less research has been done on the causes, symptoms and effects of gluten sensitivity than there has been on celiac disease, and like dairy allergies, some physicians unfortunately still don't believe it even exists. It's not clear yet whether gluten sensitivity raises your risk for other conditions, including autoimmune conditions — some researchers believe that it does, and others say it does not.

It's also not clear whether it physically damages your organs or other tissue, or whether it simply causes symptoms without incurring damage. It's also not clear yet how many people may have gluten sensitivity. Dr. Fasano's team estimates the condition affects 6% to 7% of the population (around one in five people), but other researchers place the number far higher — perhaps as high as 50% of the population.

Researchers in 2011 at the University of Maryland Center for Celiac Research believe that gluten sensitivity does exist, but involves a different immune system reaction than celiac disease. The research team led by celiac expert Dr. Alessio Fasano, have come up with the hypothesis that a person with a gluten sensitivity will be experiencing a different reaction to gluten than a person who has celiac disease.

With gluten sensitivity, the person's body will be viewing gluten protein as a foreign invader, and an antibody response is mounted both inside as well as outside the digestive tract, causing local (digestive) as well as systemic inflammation.

When it comes to celiac disease however, a person's immune system doesn't mount an attack directly on gluten itself, but the gluten protein molecules trigger the person's immune system to attack and destroy its own tissue, the microvilli, which line the small intestinal lining.

Direct Labs For Celiac Disease Comprehensive Antibody Profile

Fasting Required: No

Specimen: Blood

Results: 4-5 Business days

Test Description

Celiac disease is the immune reaction to the gluten protein in the gut sets off an inflammatory state that may cause diarrhea, abdominal cramping, distension, flatulence, weight loss, fatigue and malaise. This test is run using the ELISA method (using antibodies and colour change to identify a substance). This panel is a screening test commonly used when an individual is in a risk group for celiac disease, whether or not he/she has symptoms. Immunoglobulin A is one of the most common antibodies in the body. It's used to evaluate autoimmune conditions, such as rheumatoid arthritis, lupus, psoriasis and celiac disease. This method is more sensitive and specific than gliadin antibodies for diagnosis of celiac disease.

Here is the URL if you are interested in having this test performed:

[Celiac Disease Comprehensive Antibody Testing](#)

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Functional Test # 4

The Candida Antigen Test (Blood and Stool)

According to some experts, the candida antigen test represents the most reliable means of detecting candida albicans over-proliferation at this point in time.

Once the candida yeast infection starts to cause disease in your body, it will begin to provoke an immune response, and one of the main effects of such a response will be the production of elevated levels of specific antibodies to candida.

Your white blood cells begin to make antibodies specific against the candida infection, and these antibody levels are measured by way of this test. Some say that it is not a good way to determine if you have an active and/or current candida infection, as the antibody levels can remain elevated for some time (in some cases, months or even years) after a bout of candida, and in some people, even the slightest exposure can increase the antibody levels. Others say this does not really matter, because if your levels are high right now, it means that you still have an immune system which is very much being affected by candida. As the activity drops off, so should the level of antibody activity, but for some people they can remain high for several years.

The technique used to determine these antibody levels in the blood is called ELISA (enzyme-linked immuno sorbent assay), which is a very powerful and sensitive tool for the measurement of antibody levels in a person's blood or saliva. The way this test is performed is that a small sample of the patient's serum or saliva is coated onto a special plastic plate. The patient sample is diluted and anything in that blood or saliva sample is then grown on this plate.

If any antibodies that recognise the candida are present in the sample they will strongly bind to the candida; all remaining sample that is not bound can then be washed away and a special substrate is added. This is a colourless solution that will cause to produce a coloured sample. This colour can then be very accurately measured by something called a "spectro-photometer". If an exact known level of candida antibodies is accurately determined, then the colour that this produces can be used to produce a standard curve. A computer can then analyse the test sample's colour to give an exact value of how many candida-specific antibodies were in the original sample, now how clever is that!

Be Careful When Interpreting Allergy Test Results

I have read in the scientific literature that there have been occasions where IgA class antibody levels have been found in excess of one hundred times that seen in a normal population, particularly in those with a history of long-term antibiotic use and in those with recurrent and chronic bacterial or fungal infections. Having a strong family history of allergies can also make a person more likely to have a heightened level of the IgA class of antibodies in particular, so careful case-taking is necessary when performing this test to uncover such a history.

One of the major drawbacks of relying solely on a blood test to diagnose candida is that in a small percentage of candida cases there may actually be evidence of an IgA deficiency in a patient, which could lead to a falsely lowered reading or a negative result.

This problem may be compounded by the fact that such patients are more likely to suffer from recurrent bacterial or fungal infections of the very nature that are being tested. You should not rely solely on the outcome of any one single test, and it is best you verify a candida yeast infection by looking at several ways to assess your condition. The same goes for many different complaints you may suffer from, regardless of any form of testing, as you may now understand that are many unknown variables which can account for a false positive or a false negative test result.

Mucosal Antigen Levels Versus Serum Antigen Levels

You can determine candida antibodies by either the blood, the stool or by the person's saliva. Always remember that candida is in essence an infection of the mucosal surfaces of the body (mouth, digestive system, vagina, etc) and that saliva in this regard therefore represents a more suitable medium for the detection of these types of infections than blood samples.

Blood-based antigen levels will tell us that the infection is more systemic, meaning more widespread throughout the body, and can literally travel anywhere the blood can go, and high serum antibody levels are therefore much more indicative of major systemic infections. Now you can see why I recommend the serum antibody levels over the saliva levels for the reasons mentioned above.

Antigen Test Collection Requirements

Be sure to avoid all non-essential medications and ALL dietary nutritional supplements for at least a week before the blood is drawn (or saliva produced) before you complete this test. I am surprised how many patients I have seen over the years who take supplements and drugs and even antibiotics right up until they complete the food allergy (or any) test, what a waste of money. In addition, I would prefer that you eat and drink all the foods and beverages you desire. Yes, that's right; eat what you feel like eating for a seven day period before this test, and the reason for this is to establish the true level of antigens in your body based on your cravings and desires. This instinctive diet will reveal what is really going on inside your body and will accurately reveal the antibody level based on the diet which your body is screaming out for. Your candida antibody levels will be a reflection of what "taste's good" to you, and those with candida generally like or crave the sweeter foods. Every person's treats are a little different, so eat what you really want to eat for seven days and then complete the test.

Unless you feel absolutely terrible for eating the foods you desire, just eat what you want to eat for about a week and then perform the test. As soon as you have completed the test then go back to the anti candida diet you were before.

Direct Labs For Candida Antigen Testing

Note: This is a test kit that will be mailed to you. It requires at home collection and a blood draw.

Fasting Required: Yes 10-12 Hours

Specimen: Blood and Stool

Blood draw is not guaranteed with the purchase of this kit.

Special Instructions: Ship to lab Monday-Thursday only.

Do not freeze the stool sample.

2 weeks before test: If taking antibiotics or antifungals – or taking beneficial flora supplements (acidophilus, etc.) or consuming food products containing beneficial flora – it is recommended that you wait at least 14 days after your last dose before beginning the test (unless instructed otherwise by your physician). There may be times when your healthcare provider prefers that you stay on one of these agents (e.g. acidophilus) in order to evaluate its effectiveness. Follow your healthcare provider's recommendation.

Results: 17-21 Business Days

Description:

This test evaluates blood and stool for immune response to Candida Albicans, using the Yeast Culture and Candida IgG (Chronic) Antibodies to create a full profile. Candida is a fungus with about 154 species of which six most commonly inhabit the skin and mucous membranes. Candida Albicans represents the most abundant adaptable strain. It is useful for a wide array of symptoms, including irritable bowel syndrome, low energy, mood swings, and "foggy brain."

Here is the URL if you are interested in having this test performed:

[Candida Antigen Test](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code **R-EBN**

Direct Labs, LLC.

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Customer Service: contact@directlabs.net

You will find that the Candida Antigen Test is priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret this test for my hourly rate as well.

Functional Test # 5

Comprehensive Wellness Profile (CWP)

It makes sense to assess your overall wellness when you have psoriasis. Check out the amazing amount of functions tested with this most comprehensive blood test.

Specimen: Blood

Results: 1-2 Business Days

The CWP is the #1 ordered test - year after year! Over 50 individual laboratory tests screen for cardiovascular risk, major organ function, anaemia, diabetes, infection, blood disease and other indications of illness.

This panel is routinely ordered as a part of an annual exam. It includes:

Tests Included:

Lipids: This is a group of simple blood tests that reveal important information about the types, amount and distribution of the various types of fats (lipids) in the bloodstream. Includes Total Cholesterol, HDL (good) Cholesterol, LDL (bad) Cholesterol, Risk Ratio (good to total), and Triglycerides.

Complete Blood Count(CBC's): It is a blood test that checks haemoglobin, haematocrit, red blood cells (RBC), white blood cells (WBC), and platelets. Used as a broad screening test to check for such disorders as anaemia, infection, and many other diseases. Changing levels of red or white blood cells can indicate disease or infection and are very helpful in a health screening.

Fluids and Electrolytes: Electrolytes are minerals in your body that have an electric charge. They are in your blood, urine and body fluids. Maintaining the right balance of electrolytes helps your body's blood chemistry, muscle action and other processes. Sodium, potassium, chlorine, and carbon dioxide are all electrolytes. You get them from the foods you eat and the fluids you drink.

Levels of electrolytes in your body can become too low or too high. That can happen when the amount of water in your body changes, causing dehydration or over hydration. Causes include some medicines, vomiting, diarrhea, and sweating or kidney problems. Problems most often occur with levels of sodium, potassium or calcium. It includes: Chloride, Potassium, Sodium and Carbon Dioxide.

Thyroid w/TSH: Thyroid function is critical to your metabolism and affects your energy level, heart rate, weight control and more. The thyroid-stimulating hormone (TSH) is produced in the pituitary gland and stimulates the production of thyroid hormones. The TSH helps identify an underactive or overactive thyroid state. This comprehensive evaluation of your thyroid hormone levels includes: T-3 Uptake, T4 total, Free Thyroxine Index (T7), and Thyroid-Stimulating Hormone (TSH).

Liver: The liver panel includes several blood tests measuring specific proteins and liver enzymes in the blood. This combination of blood tests is designed to give you a complete picture of the state of your liver and help detect liver disease and measure potential liver damage. Some of the blood tests are associated with the integrity of the liver cells (i.e. ALT), some with liver function (i.e. albumin) and some with disease linked to the biliary system (i.e. alkaline phosphatase). Includes: Albumin, Alkaline Phosphatase, Alanine Transaminase (ALT or SGPT), Aspartate Transaminase (AST or SGOT), Total Bilirubin, Total Protein, LDH, Total Globulin, Albumin/Globulin Ratio and GGT.

Kidney: This basic metabolic panel is a group of blood tests that provides information about your body's metabolism. This test is done to evaluate kidney function, blood acid/base balance, and blood sugar levels. It includes Blood Urea Nitrogen (BUN), Creatinine, BUN/Creatinine Ratio, GFR, and Uric Acid.

Glucose Changes in blood glucose are a good indicator of metabolic function and can help detect diseases like diabetes mellitus. Since diabetes is the most common cause of kidney disease in adults, it is important to monitor for this disorder when evaluating kidney function.

Mineral and Bone: In addition to its mechanical functions, the bone is a reservoir for minerals (a "metabolic" function). The bone stores 99% of the body's calcium and 85% of the phosphorus. It is very important to keep the blood level of calcium within a narrow range. If blood calcium gets too high or too low, the muscles and nerves will not function. In times of need, for example, during pregnancy, calcium can be removed from the bones. It includes: Total Iron, Calcium, and Phosphorus.

Direct Labs For Comprehensive Wellness Profile (CWP)

Here is the URL if you are interested in having this test performed:

[Comprehensive Wellness Profile \(CWP\)](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code: **R-EBN**

Direct Labs, LLC.	Phone Numbers	Email
4040 Florida St. Suite 202 Mandeville, LA 70448	Local: (985) 624-9186 Toll-Free: (800) 908-0000 Fax: (985) 626-4020 Toll-Free Fax: (800) 728-9048	Customer Service: contact@directlabs.net

You will find that the Comprehensive Wellness Profile (CWP) test is priced considerably better through Direct Labs than with your current doctor or naturopath. **The recommended retail price is \$542.00, but you only pay \$97.00.** I'm happy to interpret this test for my hourly rate as well.

Functional Test # 6

Liver Function Testing

I have always found that those with psoriasis have some degree of liver congestion or toxicity. It makes sense to assess the liver's ability to clear toxins from the body. If you have read the book entitled Psoriasis, Internal Cleansing And Detox, you will understand the vital importance of having a liver that functions optimally if you have psoriasis. This urine test will quickly tell you if your liver is functioning well or not.

Direct Labs For Liver Function Test (The Hepatic Detox Profile-Doctors Data KIT)

Note: This is a home collection test kit that will be mailed to you.

Fasting Required: No

Specimen: Urine

Special Instructions: Ship to lab Monday–Thursday only.

The test requires no special diet but if you are taking sulphur containing medications or dietary supplements such as DMSA, DMPS, MSM, etc., please finish the course of medication, and then wait 4 days before starting this collection. A positive (or elevated) level of D-Glucaric Acid may result if you are using medications such as barbiturates, tranquilizers, digoxins, quinidine, or alcohol. Please refrain from taking non-essential medications, dietary supplements, and alcohol for 72 hours prior to and during the specimen collection, unless otherwise instructed by your physician.

Female patients should not collect urine during a menstrual period.

Results: 5-7 Business Days

Description:

The production, use and disposal of toxic chemicals and synthetic materials have increased the risk of exposure to health-threatening toxins. Causal relationships between toxic chemicals and diseases have been well established. However many patients endure chronic symptoms that are associated with exposure to toxins before advanced stages of specific diseases are realized.

Especially important for symptomatic patients or those who have a history of chemical sensitivity, this test does not require the use of liver toxic compounds like caffeine or paracetamol. This non-invasive test requires only a single, first morning void urine collection. Reference ranges are age and gender specific. The test does not replace comprehensive liver tests for cases of advanced liver disease, you will find these tests are part of Functional Test # 5, the Comprehensive Wellness Profile (CWP).

Here is the URL if you are interested in having this test performed:

[Liver Function Test](#)

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4040 Florida St. Suite 202 Mandeville, LA 70448	Local: (985) 624-9186 Toll-Free: (800) 908-0000 Fax: (985) 626-4020 Toll-Free Fax: (800) 728-9048	Customer Service: contact@directlabs.net

You will find that the CDSA x 3 test is priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret this test for my hourly rate as well.

Functional Test # 7

Intestinal Permeability Testing

Most all psoriasis patients will have a degree of intestinal permeability, and this test will tell you how severe it is. Have you read the book I wrote just on this topic alone? It is called Psoriasis and Leaky Gut Syndrome and explains what this condition is and how it can affect your immune system and more importantly how it often causes those flare-ups with your skin you may be experiencing. Assessing the leaky gut and healing it are top priorities for those with chronic and recurring psoriasis.

Direct Labs For Intestinal Permeability Testing (Leaky Gut)-Genova KIT

Note: This is a home collection test kit that will be mailed to you.

Fasting Required: Yes - 8 hours

Specimen: Urine

Special Instructions: Ship to lab Monday-Thursday only.

Specimens must be received in the laboratory within 24 hours of collection.

- Tell your healthcare professional if you have an abnormally high glucose level as this will interfere with testing. We CANNOT perform this test on diabetics with >105mg/dl fasting urine glucose concentration.
- If you have had allergic reactions to foods (including sugar free foods, beverages, candies, gum, and mints) dietary supplements, dental products, or medicines (prescription and over-the-counter) containing sugar alcohols like sorbitol or xylitol, you should NOT take this test.
- This test is also NOT recommended for individuals who have had allergic reactions to lactulose or are on lactose-restricted diet.
- Certain medications – such as aspirin, other anti-inflammatory drugs, antacids containing aluminium or magnesium hydroxide (e.g., Maalox liquid, Equate, Milk of Magnesia, Roloids, Mylanta) as well as drugs that contain sorbitol and/or mannitol – may affect your test results... Please let your healthcare professional know about any medications or supplements you are using before taking this test. It is recommended that you avoid the use of these medicines for at least 72 hours before taking this test.
- Gel Freezer Pack must be frozen a minimum of 4 hours before shipping.
- The night before the test: Do not eat or drink anything for at least eight hours before beginning this test.
- The day of the test: Do not eat or drink for two hours after taking the test drink. At two hours, drink a glass of water. Drink at least a cup of water every hour until you finish your test. You may eat and drink as usual two hours after taking the test drink; however, you MUST avoid certain foods or beverages, especially those containing fructose (fruit sugar), during the test. Please read all labels to double-check.

These include:

- Fruits, fruit juices, jams, jellies, etc.
- Soft drinks and foods sweetened with high fructose corn syrup
- Any dairy products
- Dietetic chocolate
- Honey
- Mushrooms, beans (legumes including peanuts), celery
- Chewing gum

Results: 7-10 Business Days

Description:

The Intestinal Permeability Assessment is an effective and non-invasive assessment of small intestinal absorption and barrier function in the bowel. This test analyses urine for the clearance of two non-metabolized sugars, lactulose and mannitol, identifying intestinal permeability ("leaky gut") and poor absorption. Both poor absorption and increased leaky gut are associated with chronic gastrointestinal imbalances, as well as many general disorders.

Here is the URL if you are interested in having this test performed:

[Intestinal Permeability Test](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code **R-EBN**

Direct Labs, LLC.	Phone Numbers	Email
4040 Florida St. Suite 202 Mandeville, LA 70448	Local: (985) 624-9186 Toll-Free: (800) 908-0000 Fax: (985) 626-4020 Toll-Free Fax: (800) 728-9048	Customer Service: contact@directlabs.net

You will find that the Intestinal Permeability Test is priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret this test for my hourly rate as well.

Functional Test # 8

Vitamin and Mineral Deficiencies (two separate blood tests)

These are two separate blood tests, one is for vitamins and the other test is for minerals. You can read all about the importance of these vitamins and minerals in the final book in the Psoriasis Program series entitled Psoriasis - Special Foods, Supplements and Herbs. It is very important that you not only eat the best very foods (see The Psoriasis Diet) and that you optimize your uptake of the various vitamins and minerals, but that you in addition assess what your level of these are in your body. That way you can be assured you are doing everything in your power to maximise your body's ability to heal your psoriasis.

Direct Labs - Vitamins Panel

Fasting Required: Yes - 10 to 12 hours

Specimen: Blood

Results: 3-5 Business Days

Tests Included:

Vitamin A: Also known as retinoids, Vitamin A ensures good eyesight and healthy skin. It also helps to strengthen the immune system.

Vitamin B1: Vitamin B1 (thiamine) acts as a coenzyme in the metabolism of the body. Deficiency of thiamine leads to the disease beriberi, a disease affecting the heart and nervous system.

Vitamin B6: A cofactor for enzymes. Deficiency in this leads to inflammation of the skin and mouth, nausea, vomiting, dizziness, weakness and anaemia.

Vitamin B9 (Folic Acid): Aids in the diagnosis of central nervous system disorders and anaemia. This important nutrient also plays a significant role in making red blood cells, making DNA, energy level, muscle strength and memory.

Vitamin B12: The main function of vitamin B12 is forming red blood cells and sustaining the nervous system. Deficiency of Vitamin B12 disturbs the DNA causing abnormalities. The abnormalities show through excessive tiredness, breathlessness and a defective immune system.

Vitamin C: Aids in several metabolic reactions and is therefore extremely important for digestion. It is an important antioxidant as well. Along with that, it helps in the formation of collagen, which is a principal protein that structures the bones, muscles, cartilages and blood vessels. It aids in the maintenance of teeth, bones and capillaries and advances the absorption of iron. It also helps in maintaining healthy body tissues and a strong immune system. Having a high content of vitamin C leads to healthy gums. It improves vision and is extremely effective in healing wounds and burns. It also reduces the effects of sun exposure and decreases the blood sugar of people suffering from diabetes.

Vitamin D, 25 Hydroxy: Used in the absorption of calcium and phosphorus in the body. As it promotes calcium absorption, it aids in proper growth and development of bones. Vitamin D also helps in strengthening teeth and bones. Secondly, one of the most important benefits of vitamin D is that it enhances the immune system of the body, which consequently helps in reducing the risk of several diseases and infections.

Vitamin E: Splendid antioxidant properties. Vitamin E plays a protective and restorative part in several body functions. It protects the body cells from oxidative damage and improves overall health of a person.

Vitamin K: Vitamin K is produced by bacteria present in our large intestine. It is required for clotting of blood and also for bone formation.

Direct Labs - Minerals Panel

Fasting Required: NO

Vitamins Panel

Specimen: Blood

Results: 3-5 Business Days

Tests Included:

Magnesium: A mineral involved in many processes in the body including nerve signalling, the building of healthy bones, and normal muscle contraction.

Iron: An essential mineral. Iron is necessary for the transport of oxygen (via haemoglobin in red blood cells) and for oxidation by cells (via cytochrome).

TIBC: Total iron binding capacity (TIBC) is a blood test that shows if there is too much or too little iron in the blood. Iron is carried in the blood attached to the protein transferrin. This test helps measure the ability of a protein called transferrin to carry iron in the blood.

Zinc: A mineral essential to the body. It is involved in the manufacture of protein (protein synthesis) and in cell division. Zinc is also a constituent of insulin, and is concerned with the sense of smell.

Potassium: Essential for normal cell function. An abnormal increase or decrease of potassium can profoundly affect the nervous system and heart. When extreme this can be fatal.

Calcium: Calcium is essential for healthy bones. It is also important for muscle contraction, heart action, nervous system maintenance, and normal blood clotting.

Phosphorus: An essential element in the diet and a major component of bone. Phosphorus is also found in the blood, muscles, nerves, and teeth. It is a component of adenosine triphosphate (ATP), the primary energy source in the body.

Direct Labs For Blood testing For Vitamin and Mineral Deficiencies

Here are the URLs if you are interested in having this test performed:

[Vitamins Panel](#)

[Minerals Panel](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code: **R-EBN**

Direct Labs, LLC.

4040 Florida St.

Suite 202

Mandeville, LA 70448

Phone Numbers

Local: (985) 624-9186

Toll-Free: (800) 908-0000

Fax: (985) 626-4020

Toll-Free Fax: (800) 728-9048

Email

Customer Service: contact@directlabs.net

You will find that the Vitamins Panel as well as the Minerals Panel are both priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret this test for my hourly rate as well.

Functional Test # 9

Fatty Acids Analysis (Omega 3 and Omega 6)

Have you always wanted to know what your levels of the essential fatty acids omega 3 and omega 6 are in your blood? This test will do exactly that. This is very important if you have psoriasis because of the strong anti-inflammatory nature of omega 3. You will also want to know the ratio of omega 3 to omega 6, the typical healthy ratio should be 1:1 or 1:2, with many people finding they have levels as imbalanced as 1:20 up to 1:100.

Note: This is a test kit that will be mailed to you and requires a blood draw.

Fasting Required: Yes - 8 Hours

Specimen: Blood

Blood draw is not guaranteed with the purchase of this kit.

Special Instructions: Ship to lab Monday-Thursday only. Ship specimen within 48 hours of collection.

It is not necessary to discontinue nutritional supplements prior to this test. Abnormalities that may be found will reveal special needs that have not been met by recent dietary and supplemental intake.

Results: 7-14 business days

Description:

Plasma fatty acid levels imitate body supplies as shaped by recent dietary intake and are useful for monitoring reaction to supplementation and dietary changes. Plasma levels are ideal for calculation of dietary sufficiency of these essential fatty acids as revealed by fatty tissue composition.

Fatty acids are the fats we obtain from our diet. They may be monounsaturated, polyunsaturated or saturated. Fatty acids are found in oils and other fats that make up different foods. Balanced fatty acid levels are essential for ideal health.

Direct Labs For Fatty Acids Analysis (Omega 3 and Omega 6)

Here are the URLs if you are interested in having this test performed:

[Fatty Acids Plasma – Metamatrix KIT](#)

If you contact the Customer Services Representatives at Direct Labs, you must quote the code: **R-EBN**

Direct Labs, LLC.

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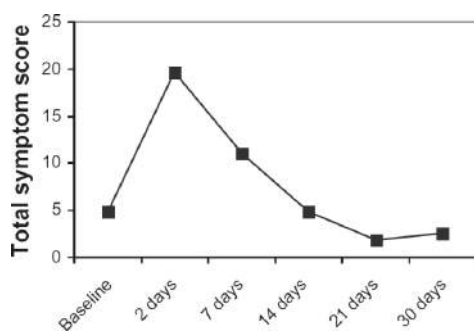
You will find that the Vitamins Panel as well as the Minerals Panel are both priced considerably better through Direct Labs than with your current doctor or naturopath. I'm happy to interpret this test for my hourly rate as well.

The Psoriasis Symptom Tracker ©

Besides completing the various functional medicine tests, there are other useful tools you can use to determine the severity of your psoriasis and track your recovery rate from it as well.

The Psoriasis Program comes complete with the Psoriasis Symptom Tracker, which can be of much assistance in evaluating the severity of your individual symptoms and their improvement as you work your way through the Psoriasis Program.

The Psoriasis Symptom Tracker



After treating many psoriasis patients over the years, I found it pointless to ask them how they feel a week or two after treatment because I know what most are going to say. Not much better.

Chronic psoriasis patients generally have been feeling bad for several months or even several years, and most will tell me at their initial follow-up visit- "Eric, I don't feel much better, in fact I feel even worse and my skin is not looking any

better either". People don't generally recover in a linear fashion from bad to good, there are lots of ups and downs along the way, and you will have read this before when I spoke of fantasy land (how wishful thinkers expect to recover) and of the reality check (how people actually recover in the real world). And, every psoriasis patient I have seen has a different expectation of a recovery. You did read "How people think they get well, and how they actually get well", didn't you? You will find this in the very first book in the Psoriasis Program series; it is the introductory book entitled The Psoriasis Program.

It is really handy to **always test and measure the effectiveness of your treatment**, just like it is when you plan anything in your life, whether it be an extension you are building on your house or an overseas holiday, start by writing it down and planning it, the preparation and timing are most important.

If you get things right and plan your course carefully, you will be able to track your rate of progress and make adjustments along the way to keep you right on target.

What is the point in recommending a treatment, and then having no system in place to measure the patient's response with? What are the mini and major milestones a patient is making along the path to recovery?

If they going off track it will be more easy to get back on track if you have some method to help you guide the way. When you start to treat psoriasis, you need to see what symptoms get better and which ones get worse. This will naturally allow you to understand which direction you are heading and will allow you to fine tune your treatment and get those positive results you are looking for faster.

I have found that some practitioners are just happy to adopt a "let's just treat the patient and see what happens" approach. This is fine, but you may or may not get the results you are looking for. But by initiating a treatment and then tracking the patient's responses over the course of several weeks, months or even years, you will really understand what is going on.

And so will the patient, and their confidence will grow in their treatment program as they can actually see what is going on. This will increase compliance and keep somebody on track longer, rather than relying on a hit and miss approach. I have found the Psoriasis Symptom Tracker to be an excellent motivational tool, and nothing is more important for patients to understand, experience and witness for themselves that their symptoms are actually improving.

If you want to measure your progress and fine-tune your prescriptions and optimize your treatment program, then you will want to adopt some sort of system whereby you can measure and track your progress, and also your lack of it. And that is where my Psoriasis Symptom Tracker comes in handy.

List your major symptoms on the left-hand side of the sheet. Now, enter a score in column A, ranging from 0 – 3. This is how the grading works:

0 – No problem, you don't experience any problems here.

1 - Mild problem, something you may experience once or twice a week and is reasonably under control.

2 - Moderate problem, it annoys you but is tolerable and you experience it several times a week or maybe even daily.

3 - Major problem. This is really annoying you and you want it gone fast. Chances are the reason you bought the Psoriasis Program was to learn how to get rid of one or several grade 3 symptoms. This could be those whitish or red patches of psoriasis plaque, that awful itching or burning, those silvery scales or those most annoying and embarrassing flakes of dead skin in your hair, your bed and on your clothes.

Just photocopy the Psoriasis Symptom Tracker and use it accordingly, this page has the common symptoms down the left column, and down the bottom there is a space for any specific symptoms that you may experience. At the top of each column, you enter the date and at the bottom leave a row empty so that you can add the scores up for that particular day to see how you are going. Scores increasing mean no improvement, scores decreasing mean an improvement, it is that simple.

Some patients also like to keep a food diary and others like to correlate a particularly high (or low) score with an event like going to a wedding (where they consumed cake, champagne or wine, chocolate, etc.) that caused an aggravation. Here you can add special short notes like "menstrual cycle started" or "started to take probiotics" or "got a cold", "teen crashed car", "argument with husband", etc.

These may appear subtle at first, yet they can be powerful factors that can influence the total scores and can give you a good indication of any events that may happen in your life that can influence the way you feel and how you have responded to a treatment or one or more lifestyle events.

If you find that your scores are increasing which correlate with stressful events in your life, then I'd like you to read "Psoriasis and Understanding the Lifestyle", in addition; and you may want to address any underlying adrenal fatigue that may be relevant.

Keep the Psoriasis Symptom Tracker under a refrigerator magnet so that it is always handy and learn to fill in the sheet for convenience sake at about the same time each week, fortnight or whenever you complete the test.

I cannot emphasize enough the importance of tracking your symptoms during the Psoriasis Program; it is one of the most important aspects of your recovery! By tracking your treatment including any dietary and lifestyle changes you have made, you will be able to accurately judge the impact of your treatment on your individual symptoms by looking at the scoring as time goes by. If you are on track, you should notice that the grade 3 symptoms will eventually become 2, and then finally a grade 1 as the weeks roll by and turn to months. How exciting!

This will tell you that as psoriasis declines, major symptoms will be improving and will eventually turn to minor symptoms. Your self-confidence and compliance to the program will increase a lot which will help you improve even quicker.

Are You Committing To The Program?

On the other hand, the Psoriasis Symptom Tracker is also a handy tool to let you know if things aren't working out the way you had hoped for. If your scores are not declining, then this could well be an alarm signal that you are not committing adequately to the program or the treatments and/or products you are using are inadequate. You have invested your time and your money into wanting to conquer that psoriasis, and this is one powerful way to track your results.

I would like to mention again, at the risk of repeating myself, that **you should not be expecting a miracle cure within a few months** of starting your Psoriasis Program if your condition is quite severe or of a very long duration. Your scores may even go from 1 or 2 to a 3 with some symptoms as you could aggravate initially with treatment, especially if die-off occurs and maybe with the cleansing or detoxification program you undertake as well.

Psoriasis is a chronic condition that is certainly never cured overnight, it takes plenty of time to heal your digestive system, and patience is one of the most important virtues when it comes to a permanent resolution from a chronic skin problem!

So remember, in an ideal world your symptoms are bad and getting better. In the *real* world however, your symptoms may initially go from bad to worse before they improve and eventually disappear. I just thought I'd remind you again, there is nothing wrong with repeating myself; I just want you to understand this crucial point because at some stage you may become disappointed or disillusioned if your psoriasis is chronic.

This is one of the reasons I wrote the Psoriasis Program, I wanted to be able to place this book in hands of a patient in my room, or a practitioner who specializes

in treating patients with psoriasis or digestive problems, and for them to know that in many cases just as they are about to give up, *if they just went that extra mile* their patient could turn the corner.

I can remember on more than one occasion telling a psoriasis patient to hang in there and that the light at the end of the tunnel does not necessarily signify the "head lamp of an oncoming train", but rather a glimmer of light in the distance which signifies hope of an eventual full recovery. When you do recover, and eventually you will, you will have learned quite a few skills along the way, and one of them is not to give up that easily on yourself. This will hold you in good measure in the years ahead as you age, when you will no doubt face plenty more health challenges that invariably come with getting old.

Track Your Symptoms For 4 Months At The Minimum

Most patients who have been chronically unwell with psoriasis are understandably impatient when it comes to the recovery process. It can appear that recovery is so slow in fact that it is unlikely to ever happen, especially when you have been so strict with your diet, taking all the supplements and making lots of sacrifices along the way. Remember, everybody gets discouraged, and it is important to get plenty of moral support during your recovery. This is one of the reasons I developed the Psoriasis Symptom Tracker, it was designed to measure the effectiveness of your treatment program over a sixteen week or four month period. If you follow the Psoriasis Program carefully, you will notice that your Total Score will decrease as the weeks go by.

By completing the two-weekly Psoriasis Symptom Tracker over a four month period, you have started to track your symptoms and can see what is improving and what is not, then you can adjust your treatment accordingly.

Monitoring your specific symptom scores over sixteen weeks allows you to really understand what is getting better and what isn't, this will allow you for example to see if your digestive system is improving, or your skin, etc. Your commitment to the Psoriasis Program will grow and deepen as you start to notice a reduction in scores over time. I have used this tracker with many patients and they email me their results with each monthly follow-up visit.

By utilizing the Psoriasis Symptom Tracker together, and perhaps the CDSA x 3 test (comprehensive stool test) if you have a chronic problem, you will have developed a very accurate picture of your psoriasis at the beginning of treatment by having established a very good baseline and with my Symptom tracker will have plenty of useful information to measure your progress by (or lack of) and make any adjustments accordingly.

The Psoriasis Symptom Tracker™

For each symptom, please enter the appropriate score in the point score column. *Don't forget the date.*

- **Mild** or an occasional symptom - 1 point
- **Moderate** or frequently severe - 2 points
- **Severe** or disabling symptom - 3 points

Please write the date and complete one column each fortnight. Don't forget to add the score and write the total at the bottom. This will allow you to most effectively track your progress of The Psoriasis Program over a 4 month period.

Psoriasis Complaints	Date →							
	Score →							
Red patches on skin								
Dry, cracked skin								
Small, scaling spots								
Itching								
Silvery scales								
Thickened, pitted or ridged nails								
Burning								
Soreness								
Swollen, painful or stiff joints								
Slow, steady spreading								
Skin or lesion bleeding								
Abdominal bloating								
Vaginal discharge, itching or burning								
Nasal congestion or discharge								
Postnasal drip, nasal itching								
Sweet cravings								
Jock itch								
Toenail fungus or tinea (itchy toes or feet)								
Constipation or diarrhea								
Gas or flatulence								
Nail discoloration								
Wheezing or shortness of breath								
Urgency or urinary frequency								
Burning on urination								
Poor vision, burning or tearing eyes								
Recurrent ear infections, pain or deafness								
Toenail fungus, discoloured nails								
Any Other Symptoms You May Have								
Total Score →								

The Three Groups Of Psoriasis Patients

The three great essentials to achieve anything worthwhile are, first, hard work; second, persistence; third, plain common sense. — *Thomas A. Edison*

I've discovered that there are three types of patients when it comes to recovering from psoriasis.

1. **Group one experience the shortest recovery time.** The first group is happy to work with my recommendations and know that it is important to follow the different stages of the program; they track their scores, do the home tests and come back regularly for follow-up visits. They always take their supplements diligently, ordering more before they run out. Group one has the quickest recovery rate; they also appear to be the quickest learners, adopting their new diet and lifestyle habits and end up with a permanent resolution of their psoriasis. This group is where I get my best results and plenty of referrals from too.
2. **Group two will take more of a hit and miss approach** and jump ahead with the program and skip a few steps here and there. They may be enthusiastic at the start but soon stop tracking their symptoms because they either get "too busy" or are easily distracted. They break the diet due to business of their life or haven't really committed. They don't do the tests nor turn up regularly for follow up visits, and may come twice or three times at the most then just appear to drop off. They take the supplements here and there when they remember and contact my office manager very infrequently, usually when they aggravate. This group has still plenty to learn about cause and effect of their psoriasis and I find that after a prolonged period of feeling quite unwell they may re-commit and become group one, or go the medical route and become one of the "walking wounded" and drop out altogether.
3. **The third category will see me once only**, never to return for that all-important follow-up visit. They probably only came to see me to see if I could help them get rid of a category 3 symptom, and had no desire to follow any diet or take any supplement, let alone track their symptoms or complete some tests. Many of these patients unfortunately appear to be stuck in the middle of a river called the Nile, (denial) if you know what I mean. This group never really recovers from psoriasis, and I have seen quite a few of these psoriasis patients over the years.

Are You Receiving Professional Care?

During my travels throughout Australia, New Zealand and America, I have had the pleasure of meeting with many practitioners who are true health-care professionals of many different healing modalities. They are professionally trained to very high levels, maintain professional registration, undertake regular professional continuing education and maintain excellent practices.

You may not meet or know the same people I do, so in that case here are ten simple tips to guide you in what to look for when choosing a natural medicine health-care professional. If any of these raise questions then you should discuss this openly with your natural health-care professional.

1 - Spends Enough Time With You

A typical initial consultation with a natural health care practitioner is anywhere from 45 minutes up to 1 ½ hours. You should have enough time to describe all your complaints, as well as being able to ask all the questions you have. Your practitioner will be relaxed and make you feel at ease, not keeping a constant eye on the clock. Does he or she make or take personal calls, or appear to be very preoccupied with a computer screen or other business?

2 - Takes A Complete Medical History

On your first visit, your practitioner should ask extensive questions on your medical history and take your case thoroughly. Your practitioner should be competent enough to at least have a greater knowledge of your disease and their treatments than you yourself, the person actually presenting with the complaints. Does she enquire into what medications you are taking; ask for blood-test results and perhaps even check out any specialist reports you may bring with you? This shows a high regard for your current medical care, and will certainly put you more at ease right from the beginning.

3 - Is Professionally Qualified And Registered

Does your health care practitioner have any professional registrations? These should be displayed, along with the appropriate certificates, diplomas or degrees of qualification. Feel free to enquire where he or she qualified from, if they are professionally registered and how long they have been in practice for. You have a right, after all, you are entrusting them with your most precious asset: your health.

4 - Performs A Basic Screen Each Visit

Basic health checks such as blood pressure and weight are important. It is surprising to me that some patients have never even had their blood pressure checked by their natural health practitioner. Avoid practitioners who fail to write things down or who don't take any notes each and every time they see you.

They should be able to present your file in a few seconds and be familiar with what they recommended previously. Does she keep neat files; is the room neat and tidy? What is their appearance like? Your sixth sense will tell you if something doesn't quite add up here.

5 - Help Explains What Is Wrong, Takes The Time To Answer Your Concerns.

Your practitioner should be willing to discuss all aspects of your illness, helping you to understand what is going on, what the diagnosis means if one has been made and help to allay any fears or anxieties you may have. Be aware of instant or snap diagnoses, claims of a cure, or practitioners who ridicule other practitioners or other treatments in the health care field.

6 - Can See You In Emergency Situations

A good and caring practitioner will keep some time free for patients who need attention with urgent health problems. Can you call him or her two days later with a concern regarding the treatment, and have a quick word about a strong effect from something prescribed? Are you not even giving two minutes on the phone to allay your concerns, and told rather to make yet another appointment? Do you find that he or she won't return your call, not even after a few weeks? It may be time to look elsewhere for your healthcare.

7 - Keep Track Of All The Medications You Take

Your practitioner should review all medicines you are taking, including any prescribed or over the counter drugs like acetaminophen, NSAIDS, blood pressure medications, pharmaceutical, herbal as well as nutritional medicines. Any conscientious practitioner will understand drug-nutrient or herb interactions and will always be on the lookout for potentially harmful interactions and ask you if you are experiencing any side effects. Does your practitioner do this? This is a very important aspect of any natural medicine practice. I find regularly in my practice that patients on several drugs approach me with strong symptoms, of which many are the side effects from their prescribed drugs. What a waste of time and their hard earned money when they try to counteract these drug-induced complaints with vitamins and mineral supplements. It is prudent to remember that the fourth leading cause of death in America is from the conventional Western medical health care system and particularly from pharmaceutical drugs. (*Journal of American Medical Association July 2000*) Do we have any reason to believe that these statistics are any different in other developed countries?

8 - Makes Fees Available, And Is Willing To Discuss All Of The Charges

You should be able to obtain a list of all the charges for various procedures, appointments and tests. If there is any reluctance or confusion when you enquire about fees, this is a warning sign that your practitioner may not be right for you.

9 - Arranges Follow Up Visits Periodically

Not every health problem is solved the moment you leave your practitioner's office. A caring practitioner should like to see you periodically so that he or she can monitor your progress. Follow-up appointments are important and should be scheduled regularly until you show good improvement in your health. If you have not shown any progress in your condition after several treatments, you should be able to discuss this freely and decide with your practitioner if their treatments are really right for you. You are not obliged to book ahead for several treatments and expect to pay fees upfront for treatments you have not had.

10 - Is Always Willing To Work In With Your Medical Doctor

Professional natural health therapists embrace medical science, rather than ridicule it. By willing to work in with or alongside your medical doctor, your natural medicine practitioner is showing you that he or she is a true health care professional. Many professional natural therapists today have Bachelor of Health Science degrees and even Masters degrees and higher. This is quite different from the days when diplomas were sufficient. However, you may find that your doctor could show reserve or perhaps even mock your treatments with your natural medicine health care practitioner, and it is important to remember that "condemnation without investigation is the highest form of arrogance". Don't let your doctor put you off; you decide what healthcare is right for you. You may need to find a doctor who is willing to accept your stand to embrace the healing powers of nature. The choice is ultimately yours.

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